STATE OF SOUTH CAROLINA )		216248		
(Caption of Case)  Example: Application for a Class C Charter Certificate from John Doe dba Doe's Limo		) BEFORE THE ) PUBLIC SERVICE COMMISSION ) OF SOUTH CAROLINA )		
8. N		TRANSPORTATION COVER SHEET  DOCKET  NUMBER: July -	u. If )	
Sub Add 人力	ress: 8441 Prenkness Dr 1220 N. Chas, SC 29420	`		
as rec	E: The cover sheet and information contained herein neither replace united by law. This form is required for use by the Public Service led out completely.	Commission of South Carolina for the purpose of docketing and n	pers nust	
	NATURE OF ACTIO	N (Check all that apply)		
	Application – Class C Taxi	Request to Amend Scope of Authority		
	Application – Class C Charter	Request to Amend Tariff (rate increase, et	tc.)	
	Application – Class C Charter Bus	Request to Amend Passenger Limit		
	Application – Class C Non-Emergency	Request		
	Application – Class E Household Goods	Exhibit		
	Application – Class E Hazardous Waste	Late-Filed Exhibit		
	Application	Letter		
	Request for Extension to Comply with Order	Proposed Order		
	Request for Order Granting Authority to Obtain Certificate Public Convenience and Necessity to Be Rescinded	Publisher's Affidavit  Reservation Lettor  Response  Return to Petition		
	Request for Cancellation of Certificate	Reservation Letter		
	Request for Suspension	Response Response		
	Request for Reinstatement	Return to Petition		

Request for Name Change on Certificate

Other:

#### FORM C-AC

# PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA ATTN: DOCKETING DEPARTMENT 101 EXECUTIVE CENTER DRIVE

COLUMBIA, SOUTH CAROLINA 29210

(Mailing address: Post Office Box 11649, Columbia, SC 29211) Office # (803) 896-5100 - Fax # (803-896-5199)

CLASS C - TAXI

1

DATE 4/8, 2009

### APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1.	Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)
	George Footman
	George Footman  dba Footy's TAY;  (a) Street Address of Applicant 8441 Prenkness Or Lt 22
2.	(a) Street Address of Applicant 8441 Prenkness Or Lt 22
	N. Charleston, 5C 29420
	(b) Mailing address, if different from street address
· · · · · · · · · · · · · · · · · · ·	SAME
	(c) Telephone Number (843) 330 - 7352
3.	If incorporated, a copy of Articles of Incorporation must be attached.(If incorporated outside of S.C., need S.C. Secretary of State "Foreign Corporation" Certificate.)
4.	(a) If a partnership, names and addresses of all persons having an interest in the business. (b) If a corporation, names and addresses of two principal officers will be sufficient.
5	The proposed service to be provided and the proposed rates and charges for such

- The proposed service to be provided and the proposed rates and charges for such service, per Exhibit "C" included herewith.
- The proposed list of equipment is as per Exhibit "D" included herewith. 6.

7. Applicant is financially able to furnish the services as specified in this Application and submits the following statement of assets and liabilities.

BALANCE SHEET

Balance at Time Application is Filed:
Month: April Year: 2009

Assets:

Cash

Receivables

Real Estate

Buildings and Equipment-Net

Motor Vehicles-Net

Garage Equipment-Net

Carago Equipment-Net	
Machinery and Tools-Net	
Supplies on Hand	
Prepaids and Other Assets	
Total Assets	4100.00
Liabilities and Equity:	
Accounts Payable	
Notes Payable	
Mortgages Payable	
Equipment Obligations	
Accrued Salaries and Wages	
Other Accrued Obligations	
Other Liabilities	Ð
Total Liabilities	D-
Capital Stock	
Retained Earnings	
Total Equity	

**Total Liabilities and Equity** 

8. Applicant is familiar with the provision of S.C. Code Ann., §58-23-10, et seq. (1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 th 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol. 23A, S.C. Code Ann., 1976) and amend thereto, and hereby promises compliance therewith.

4100,00

STATE OF SOUTH CAROLINA, ]	
COUNTY OF Berkeley	
1, George Footman Dwner	
(Name of Applicant's Representative) (Title)	
of FOOTY 5 TAYI the Applicant for the Certificate of Public (Applicant)	
Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above Application	re
true and correct.	
SWORN TO BEFORE ME  This the Stand day of Capal 2009  Chocary Marie (Signature of Applicant's Representative)  Constributor Optres:  ARY  ARY  ARY  ARY  ARY  ARY  ARY  AR	

TAXI\_\_\_\_\_

CHARTER\_\_\_\_

## PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

Columbia, South Carolina

Applicant <u>George</u> F	botman c	lba Footy	3 TA4
For the transportation of passengers as	follows:	,	
Area to be served:	thas +	BerKeley	Co
Number of passengers: 5			
Fares: 1,50 p	er Mile		·
Date 4/8/09	Grane	Boetman Footman	
	Applioant  D LO 1  Title	_	

Rev.10/03

### **INSURANCE QUOTE**

The following insurance quote is for:
(Name of Motor Carrier)
(Address of Motor Carrier)
Amount of Premium:
Amount of Premium:  Liability Insurance  The above quoted premium is for a term ofmonths.
The above quoted premium is for a term ofmonths.
Minimum Limits - Intrastate Only:
1 - 7 passengers - 25,000/50,000/25,000 8 - 15 passengers - 25,000/100,000/25,000
(Insurance Company Name)
(Home Office Address of Company)
is familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.
Date (Authorized Insurance Company Representative)

# INSURANCE QUOTE

The following insurance quote is to:
(otorgo fritzena)
(Name of Motor Carder)
(Name of Motor Carder)  Off Preskuess De  (Address of Motor Carder)
Amount of Premium:
Liability Insurance 2900
The above queted premium is for a term of months
Minimum Limits - Intrastate Only:
1 - 7 passengers - 25.000/50,000/25,000
25.090/100.000/25.000
Ja then United Fire (Insurance Company Name)
1248 Celebration BLVD Florine, SC 29501
(Home Office Address of Company)
is familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company
making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.
4-8-09
Date (Authorized Insurance Company Representative)